



**Department of
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Fact Sheet

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VA Care Coordination & Telehealth

Operating the nation's largest health care system, the Department of Veterans Affairs (VA) uses a wide variety of communication and information technologies to ensure excellence in the health care it delivers to the nation's veterans. New information technologies are revolutionizing health care, and VA has been recognized by the Institute of Medicine as a leader in using these technologies to improve the quality of its care delivery. VA's application of three areas of technology -- health informatics, telehealth and disease management -- enables VA to coordinate the care of patients by extending and enhancing current care and case management activities.

Care Coordination

Care coordination in VA uses information technologies to connect patients to health care services and help ensure the right care happens in the right place at the right time. Care coordination home telehealth supports care in the home and helps patients enjoy better health and remain living independently when appropriate. Designated VA clinical staff act as care coordinators. Through technology, they maintain daily contact with patients and reduce the need for clinic, emergency and hospital care.

When it is necessary for patients to come into clinics and hospitals, real-time video conferencing technologies enable veterans to receive specialist consultation and care in their local community clinic or hospital and eliminate avoidable travel to distant sites. These care coordination general telehealth services help ensure timely access to care.

VA supplements both home and general telehealth with "store-and-forward" telehealth -- the storage of digital images that can be transmitted for review and reporting at another site by an expert in dermatology, pathology, radiology, eye care or wound care. Both kinds of telehealth are used in the routine delivery of care throughout VA with high levels of patient satisfaction.

Telehealth in VA

"Telehealth" can involve providing clinical care as well as support services, and patient education when those providing services and those receiving them are separated by distance, whereas "telemedicine" generally refers to physicians providing services at a distance. VA considers telemedicine part of the wider spectrum of "telehealth" services given by many types of care and support providers.

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Telehealth 2/2/2/2

VA began systematic development of telemedicine in the mid 1990s with pilot projects to confirm technical feasibility and started funding demonstration projects in 1998 to define telemedicine's role in supporting home care and making specialty consultations locally available. The projects involved spinal cord injury, mental health, transplantation, geriatrics and extended care. In 2000, a survey showed that VA was conducting more than 300,000 telemedicine consultations a year and telemedicine activity in 32 clinical specialties.

Telehealth activities in VA are performed in association with VA's computerized patient records. In 2003, VA's use of these technologies to extend VA care into the home and to move specialty care to primary and ambulatory treatment sites resulted in the concept of care coordination. To support a national care coordination initiative, VA established an Office of Care Coordination within the Office of Patient Care Services.

Between 2004 and 2005, VA identified telehealth leaders in mental health, rehabilitation, surgery, dermatology and endocrinology. These practitioners champion the development of home and general telehealth in VA, based upon sound clinical practice and scientific evidence, and help VA assess the outcomes of care coordination.

Advantages of Care Coordination & Telehealth to Veteran Patients

Care coordination and telehealth provide patient-centered care for veterans and support to their caregivers. Information technology can ensure that all data related to a patient's conditions are current and available to medical providers exactly when needed. Timely access to health information improves care and reduces the risk of medical errors.

As impressive as the technology is, the key to telehealth success is the way it helps in coordinating patient care. Successful home telehealth programs that match a patient's needs to technology that the caregiver or patient can manage also reduce clinic visits. As a veteran ages, the need for services is frequently determined by expert advice on appropriate treatment of chronic conditions. Having this advice available in the home is convenient and can expedite or defer hospital admission.

Telehealth makes it possible to exchange routine clinical data and visual assessments among medical facilities locally, regionally and nationally. There are parts of the country where distance and weather are barriers to care. Telehealth brings care to the patient and avoids the cost and inconvenience of travel. Telepharmacy, one telehealth application, helps make medications available to veterans in VA community clinics. Telehealth permits a northern "snowbird" veteran receiving care at home through telehealth to continue a care regimen in Florida in the winter.

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Telehealth 3/3/3

Telehealth electronic information and communications can sometimes involve high-resolution images and sound through live video. An example of this is providing veterans in remote, rural areas prompt access to expert advice from a cardiologist or a spinal cord injury center. Sometimes telehealth involves simply transmitting text records and digital images, as can happen in remotely screening patients with diabetes for possible eye disease. Because telehealth moves information, rather than people, it can be more efficient and less expensive than traditional care and provide expert advice when a patient needs it. Improving access to care, and permitting more frequent monitoring of patients and their health status, are the features of care coordination and telehealth that produce high-quality care and satisfaction among patients.

Examples of Care Coordination & Telehealth

In VA's Sunshine Healthcare Network, including most of Florida, south Georgia and Puerto Rico medical facilities, about 2,700 patients receive telehealth care in their homes. Many of them use text messaging devices to report their vital signs and other medical information to hospital staff monitoring the reports daily. In turn, staff sends patients reminders, health advice and feedback on their progress. VA patients in about 30 states use these and other home telehealth devices. Many of the patients have congestive heart failure, high blood pressure, pulmonary disease, diabetes or depression.

Many VA medical centers use an interactive voice-response system to take questions from patients and leave phone messages for them automatically about appointment scheduling and prescriptions. The system permits clinicians to pose questions to patients and have their responses recorded, thereby becoming progress notes. Results of the calls are forwarded to a telemedicine computer so clinicians can follow up.

Clinicians providing telehealth care in the Sunshine Network and other locations studied their patients' outcomes. They found improvements in blood glucose levels, blood pressure and mental health, along with fewer emergency room visits, days of hospitalization and clinic visits, and less extended care.

The National Cancer Institute has collaborated in studying an initiative by the VA Sunshine Network and the University of Florida to evaluate whether telehealth can deliver more effective care to cancer patients in their homes.

VA's home telehealth technologies can connect VA medical centers directly to veterans' homes. The technologies range from sophisticated clinical workstations that can assess complex care, to telemonitors in the home that can assess wounds, down to the least costly – the regular telephone, with personal computers and videophones somewhere in between.

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Telehealth 4/4/4/4

In 2004, more than 10,000 VA patients received more than 20,000 telemental health visits. In mid-summer 2005, more than 6,000 patients are benefiting from home telehealth care for conditions that include diabetes, cardiac failure, depression and post-traumatic stress disorder.

New Initiatives – The Future

VA has established four polytrauma centers to treat the full scope of injuries to veterans, especially injuries sustained in Operation Enduring Freedom and Operation Iraqi Freedom. The polytrauma centers will use telehealth technologies both to improve access to these centers and to share the expertise of these national centers with all VA health care facilities.

VA has established two national multiple sclerosis centers of excellence, one at the Baltimore VA Medical Center (VAMC) and the other as a collaboration between the Portland (Ore.) VAMC and the Seattle VAMC. Both home and general telehealth are being explored to ensure that veterans seen at a VA clinic or medical center in other parts of the country will have the opportunity to receive care that is supported from these centers. In a similar manner, seven VA Parkinson's disease centers that specialize in treatment, education and research are seeking to develop a telehealth network to extend their expertise to veterans nationwide.

VA is working with experts in diabetes care to create a telehealth network to detect retinopathy, a disease of the retina of the eye prevalent among diabetic patients. Preventing diabetes-related blindness is a major VA priority.

Five telehealth "toolkits" have been distributed to VA medical facilities for home telehealth, mental health, dermatology, surgery and rehabilitation to connect those who are considering introducing telehealth with a network of practitioners using it. The toolkits contain resource materials, including templates and guides to best practices. VA is creating an additional toolkit for teleretinal imaging.

To further develop toolkits and train staff in care coordination, VA established a training center for home telehealth in Lake City, Fla., in January 2004. This center has trained more than 1,600 VA employees, using distance education technologies and face-to-face teaching methods. In 2005, VA is establishing a general telehealth training center in Salt Lake City and a training center devoted to tele-retinal imaging in Boston.

VA is continuing to work with the Joint Commission on Accreditation of Healthcare Organizations (JCAHO) to ensure the quality of its telehealth services. A joint activity underway will develop ways to credential professionals who provide telehealth care. Since telehealth provides clinical services at multiple sites where medical staff may not know the qualifications and professional privileges of others, credentialing can be important both to caregivers and patients. VA is working with JCAHO to determine how home telehealth programs will be assessed under existing home or hospital care standards.

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Telehealth 5/5/5/5

Other challenges in the future include developing large information networks that will support compatible hardware and software systems, deciding whether to standardize treatment approaches and equipment, and developing standard coding procedures for workload credit. VA is working to give patients decision support tools that complement those of the care coordinators and other practitioners by developing an electronic patient-held record called MyHealth-eVet. That achievement will be an important part of the partnership between VA, its care providers and its patients and help veterans to manage their own care.

With the focus of care on non-institutional care settings and the abilities of care coordination telehealth to support veterans in their local communities, VA is assessing the impact on the caregiver and considering the kinds of partnerships it may need to develop with caregivers to support patients.

VA is acknowledged as a leader in using innovative technologies to change the locations of health care and improve the care quality it provides. Aspects of care involving health informatics, telehealth and disease management that many other health care organizations are visioning for the future are happening in VA today with positive impacts on the lives of the veteran patients.

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